

**WARNING: IF YOUR NAME APPEARS IN ITEM 4, THIS PROCEEDING MAY
RESULT IN SEVERE LIMITATIONS UPON YOUR PERSONAL LIBERTY.**

STATE OF MAINE

_____ COUNTY PROBATE COURT

DOCKET NO. _____

In Re: _____
Alleged Incapacitated Person

**PETITION FOR APPOINTMENT
OF GUARDIAN FOR
INCAPACITATED PERSON**

1. Name, address and telephone number of petitioner:

2. Name, address and telephone number of nominee to become guardian: (If same as item 1, enter “same.”)

3. Date of birth of person listed in item 2, and relationship of such person to the alleged incapacitated person, or, in the alternative, describe the official purpose and scope of services furnished by the institution listed in item 2: ¹

4. Name and residence address of the alleged incapacitated person. ²

5. Current location of the alleged incapacitated person: (If same as item 4, enter “same.”)

6. Date of birth of the alleged incapacitated person if known – if birthdate is not known, give approximate age in years:

7. Names and addresses of all persons who must be notified, including the alleged incapacitated person and the relationship of each person to the alleged incapacitated person:³ (Use separate sheet if necessary.) The following must be notified:

- (a) the person alleged to be incapacitated
- (b) the person's spouse, domestic partner, parents and all adult children;
- (c) any person currently serving as the person's guardian or conservator or who has the person's care and custody; and
- (d) if there are no persons to notify under (b) above, then the closest adult relative who can be found or, if no close adult relative can be found, an adult friend.

NAME

ADDRESS

RELATIONSHIP

8. Any person listed in item 7 other than the alleged incapacitated person may waive notice and hearing and agree to this appointment by signing here.

9. Is a temporary guardian required? YES NO. If yes, state here the reasons why and the name and address of the suggested temporary guardian: An affidavit setting forth the factual basis for the emergency and the specific powers requested is required.⁴

10. Is the alleged incapacitated person currently represented by counsel? Yes No. If yes, state name, address and telephone number of said counsel. If no, an Attorney, visitor and/or guardian ad litem will be appointed by the Court.

11. State what funds are available in the estate of the alleged incapacitated person to pay the cost of the appointment.⁵

12. Does the petitioner request that the Court order that notice be served on the allegedly incapacitated person by the visitor?⁶ Yes No.

13. Does the alleged incapacitated person have a Health-Care Power of Attorney, Health-Care Directive or other document nominating a fiduciary for health-care purposes? Yes No.

14. The petitioner believes that a general limited guardianship is appropriate in this case.

NOTE: All required reports and plans must be filed at least 10 days prior to any hearing on this petition.⁹

The petitioner believes that the person alleged in this petition to be incapacitated is impaired to the extent that the person lacks sufficient understanding or capacity to make or communicate responsible decisions and that the appointment of a guardian is necessary or desirable as a means of providing continuing care and supervision of the person of the proposed ward.

Dated: _____

Petitioner or Attorney

“Every pleading of a party represented by an attorney shall be signed by at least one attorney of record in his individual name.” See Rule 11.

Name, address, telephone number and Bar Registration Number of Attorney for petitioner, if any:

Attorneys appearing for other parties, if any:

Name of Attorney

Name of Party

¹ See 18-A M.R.S. § 5-311 for priority of persons who may serve as guardian.

² The address listed here or in item 5 must be in this county to establish venue. See 18-A M.R.S. § 5-302.

³ The following must be notified: See 18-A M.R.S. § 5-309(c) and Rule 4(d)(1)(D) of the MRPP for further information.

⁴ See 18-A M.R.S. § 5-310-A.

⁵ See 18-A M.R.S. § 5-303(b). Visitor, guardian ad litem, or attorney shall be appointed unless incapacitated person has counsel or will attend hearing, or appointment will serve no useful purpose.

⁶ See 18-A M.R.S. § 5-309(b).

⁷ See 18-A M.R.S. § 5-105, 5-304(a).

⁸ See 18-A M.R.S. § 5-101 for definition of incapacitated person.

⁹ See 18-A M.R.S. § 5-303(d).